

State of California Secretary of State

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FILED Secretary of State State of California

JAN 20 2015

Statement of Information

(Domestic Nonprofit, Credit Union and Consumer Cooperative Corporations)

Filing Fee: \$20.00. If this is an amendment, see instructions. IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME

BURNERS WITHOUT BORDERS

2. CALIFORNIA CORPORATE NUMBER

C3501514

This Space for Filing Use Only

Complete Principal Office Add	iress (Do not abbreviate the name of the	city. Item 3 cannot be a P.O. Box.)		•
3. STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY		ÇITY	STATE	ZIP CODE
660 Alabama St. 4th Floor		San Francisco	CA	94110
4. MAILING ADDRESS OF THE CORPORATION		CÍTY	STATE	ZIP CODE
660 Alabama St. 4th Floor		San Francisco	CA	94110
	ses of the Following Officers (The operation of the second preprinted titles on this form must not be all		ers. A compara	ble title for the specific
5. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
Carmen Mauk	660 Alabama St. 4th Floor	San Francisco	CA	94110
6. SECRETARY	ADDRESS	CITY	STATE	ZIP CODE
Carmen Mauk	660 Alabama St. 4th Floor	San Francisco	CA	94110
7. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
Carmen Mauk	660 Alabama St. 4th Floor	San Francisco	CA	94110
address, a P.O. Box address is not	If the agent is an individual, the agent mut acceptable. If the agent is another corp porations Code section 1505 and Item 9 mm PROCESS	oration, the agent must have on file		
9. STREET ADDRESS OF AGENT FO	R SERVICE OF PROCESS IN CALIFORNIA, IF	AN INDIVIDUAL CITY	STATE	ZIP CODE
660 Alabama St. 4th Floor		San Francisco	CA	94110
Common Interest Developmen	nts			
Development Act, (Californ (California Civil Code section)	ion is an association formed to manage nia Civil Code section 4000, et seq.) or in 6500, et seq.). The corporation must file Code sections 5405(a) and 6760(a). Pleas	under the Commercial and Industries Statement by Common Interest De	al Common Inte velopment Assoc	rest Development Act,
11. THE INFORMATION CONTAINED H	HEREIN IS TRUE AND CORRECT.		1 / 1	/ //
1/8/2015 Angela Sand	ers	Legal Assistant	recht	anhe
DATE TYPE/PRIN	T NAME OF PERSON COMPLETING FORM	TITLE	SIGNA	TURE
SI-100 (REV 01/2014)			APPROVED 8	Y SECRETARY OF STATE